Instructor Approval Application

Michigan Department of Labor & Economic Growth Bureau of Construction Codes & Fire Safety Office of Local Government and Consumer Services P.O. Box 30255

P.O. Box 30255 Lansing, MI 48909 517-241-9347

Agency use only	
INSTRUCTOR APPROVAL NUMBER	

Authority: 1986 PA 54
Completion: Mandatory
Penalty: Instructor will not be approved

The Department of Labor & Ec color, marital status, disability, complete make your needs known to this

The Department of Labor & Economic Growth will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

Act 54 of 1986 and the Building Official, Plan Reviewers, and Inspector Registration Rules requires the Construction Code Commission to review and approve educational and training program instructors who will present instructional programs to building officials, plan reviewers, and inspectors to meet their continuing educational and training requirements as stipulated under the Act. For approval, instructors shall complete this form and submit it to the address listed above with the required \$25.00 fee. Please make check or money order payable to the State of Michigan.

Required Standards - For Construction Code Commission approval of instructors, the following standards must be met:

- Instructors must have four years of experience in the subject to be taught.
- For technical and specialty categories in plumbing, electrical, or mechanical trades, instructors must have licensure at the journey level or higher or equivalent work history in addition to the four year experience requirement above.

New Applicant	Instructor Renewal - Instruct	or Number				
Applicant Information NAME (Last, First, Middle Initial)	pplicant Information NAME (Last, First, Middle Initial) SOCIAL SECURITY NUMBER*					
The least 1 hot mode made						
ADDRESS				TELEPHONE NUMBER (Include Area Code)		
CITY	COUNTY	STATE		ZIP CODE		
Applicant Background - List a summary of work history or experiences relative to the subject to be taught. (Attach additional pages, if necessary)						
Educational/Training - List educational and training courses or programs completed relative to the subject to be taught. (Attach additional pages, if necessary)						
Certifications, Licenses, Registrations - List all certifications, licenses, or registrations held that relate to the subject to be taught. (Attach additional pages, if necessary)						
Previous Teaching/Training Experience - List any previous teaching or training experiences. (Attach additional pages, if necessary)						
Signature APPLICANT'S SIGNATURE		TITLE		DATE		
300.000						